

**Exhibit 1
CITY OF OVIEDO
BUDGET TRANSFER/AMENDMENT DETAIL FORM**

For Accounting use:

Fiscal Year: FY 13-14 Accounting Approval: _____
 Period: _____ Entered By: _____
 Transaction Date: _____ Group Number: _____

Department/Division _____

Dept. Authorization _____

Account Number	Fund / Account Description	Increase	Decrease
106-0000-389.90-00	Other Sources/Prior Year Budgetary CF	\$ 58,000	✓
106-2100-521.52-04	Operating Supplies/Small Tools	\$ 58,000	

Count

TOTAL

\$116,000

\$0

-----Must Balance-----
(Do not use cents)

Notes / Comments

Use of Fund Balance to purchase start-up equipment and tools for SRT unit.

Approved By: Check Appropriate Box OKDW 11/7/13	City Council: Exceeds \$35,000	Informational Note Only: Programs/Capital not budgeted must be presented to Council [Date Signed:	Resolution # 2754-13
	City Manager: Less than \$35,000		Approval Date: 11-04-2013
	Mgt Svc Director: Internal		BA # - 2014- 010
	Signature: _____		

Robert R. Hayes